## 1. DATE SUBMITTED NWS CHANGE FORM 18July00 PART A Received 8/3/00 This form is in three parts. Submitters must complete unshaded blocks in Part A and as much of Part B as possible. WSH will complete Part C (implementation details). If there is no specific required change date, enter 60 days from date submitted. Address questions to NWS Change Management at (301) 713-1373. Submit change requests to the NWSRC mailbox (External: NWSRC@noaa.gov). 3. SUBMITTING AUTHORITY 4. COGNIZANT TECHNICAL INDIVIDUAL 5. ORIGINATOR TRACKING NUMBER 2. ORIGINATOR OFFICE Name: Ward Sequin Name:Walter T Scott NWS/WAPO Routing Code:WAPO3 Routing Code:WAPO3/SE Phone:301-713-1570 x 146 RC\_APO78 6. SYSTEMS AFFECTED BY CHANGE 7. WSH TRACKING NUMBER DATA PRODUCTS (Complete Data Products Supplement) **NWS 617** ☐ ASOS X AWIPS ☐ CRS ☐ NEXRAD OTHER (specify) 8. TITLE OF CHANGE Investigation of Potential Improvements on Products Storage Times. 9. TYPE OF CHANGE 10. SITES AFFECTED (Attach Part B, Page 2, if needed) ☐ HARDWARE SOFTWARE DOCUMENTATION ONLY Pleasant Hill WFO - FAX 11. STATEMENT OF REQUIREMENT, PROBLEM, OR DEFICIENCY OF EXISTING SYSTEM (Include problem report reference numbers.) Several sites have experience delays in recieving product including warnings that have been disseminated over the AWIPS Satellite Broadcast Network. Delays of as much as 1 hour have been experienced on several occassions. Analysis has focused the the problem in the area of the "Storage que" on the data server. 12. KNOWN OR PROPOSED SOLUTION (Include source and description of new features or data products.) Test a potential fix for this problem by installing an additional 512MB of memory on the primary data server of the above identified site. The site currently has 256MB and therefore the total memory size will be increased to 768MB. The site will be run in this configuration for a period of 60 days and shall be monitored. An analysis will be performed and further action will occur based on the results of the analysis. The additional memory will be purchase by the site and the AWIPS NCF will coordinate installation with the Maintenance Contractor. 13. ALTERNATE SOLUTIONS None 14. REQUIRED 15. RATIONALE FOR REQUIRED CHANGE DATE (Include proposed priority, if known.) CHANGE DATE Tornado season is well underway, and several of the sites where this problem have been observed are within "Tornado Alley". 01Aug00 CCB/PMC/CMB DECISION 16. DECISION AUTHORITY LEVEL ☐ CCB LEVEL ONLY FAST TRACK PMC or NWS CMB DECISION REQUIRED 17. CCB LEVEL DECISION SIGNATURE X **APPROVED** Fast Track Approved by APO/AWCCB Chair RECOMMEND APPROVAL DATE SIGNED DISAPPROVED FOR USE ONLY WHEN PMC or NWS CMB DECISION REQUIRED 18. PMC OR NWS CMB DECISION SIGNATURE **APPROVED**

DISAPPROVED

DATE SIGNED

| NWS CHANGE FORM<br>PART B  |  |                           | 1. ORIGINATOR TRACKING NUMBER RC_APO78 |  |  |
|--|--|---------------------------|--|--|--|
| All RC/ECP submissions must also address the following information. Indicate if any apply. State why information is unknown and when it will be available. Attach ext referencing each applicable subject. | 2. WSH TRACKING NUMBER NWS 617   |                           |  |  |  |
| FUNDING INFORM   | MATION   |                           |  |  |  |
| Estimate costs and indicate known sources of funding. (Include travel time, installation time, administrative time, and software development time when applicable.)  |  | 3. SOURCE OF FUNDING      | 4. TOTAL COST  XXXX                    |  |  |
| 5. DEVELOPMENT COSTS (Estimate development costs)  |  | Site Operations<br>Budget | AMOUNT<br>XXXX                         |  |  |
| 6. OPERATIONAL TEST AND EVALUATION COSTS (Estimate test and evaluation   | costs)   |                           | AMOUNT<br>0                            |  |  |
| 7. PRODUCTION COSTS (Include acquisition, kit proofing, spares, delivery, and doc  | umentation costs)  |                           | AMOUNT<br>0                            |  |  |
| 8. COMMUNICATIONS SERVICE/CIRCUITS COSTS (Include installation and recurring costs)  |  |                           | AMOUNT<br>O                            |  |  |
| 9. IMPLEMENTATION SUPPORT COSTS (Include travel, installation, and administration)   | ative costs)   | APO Contract<br>Funding   | AMOUNT<br>XXXX                         |  |  |
| 9A. LIFE CYCLE SUPPORT COSTS (Less communications service/circuits)  |  | AMOUNT                    |  |  |  |
| SUPPORTING INFORMATION AND SCHEDULES  Provide detailed information needed to implement the requested change.   |  |                           |  |  |  |
| 10. DEVELOPMENT STATUS/SCHEDULE (Major milestones such as Start, Beta Test, and OT&E) NA   | 11. PRODUCTION STATUS/SCHEDULE (Major milestones such as Solicitation, Contract Start Date, Delivery Date, Kit Proofing, etc.)  NA |                           |  |  |  |
| 12. IMPLEMENTATION/RETROFIT SCHEDULE NA  | 13. FACILITY INFORMATION (Attach facility drawings/plans.)<br>NA   |                           |  |  |  |
| 14. COMMUNICATIONS INSTALLED (Type required, who will order, and associated hardware required; attach Part B, Page 2, if needed.) NA   | 15. COMMUNICATIONS SERVICE/CIRCUITS TO BE REMOVED NA   |                           |  |  |  |
| 16. REQUIRED CLEARANCES, WAIVERS, AND LICENSES (Include person or organization responsible for obtaining each) NA  | 17. COORDINATION OF CHANGE WITH OTHER CHANGES NONE   |                           |  |  |  |
| 18. PHYSICAL ITEMS AND DOCUMENTS AFFECTED (Include part, serial, and document numbers. Attach Part B, Page 2, if needed.)  Site Bill of Materials  | 19. STAFF RESOURCE IMPACTS (Skills and workload impact on maintainers, operators, and managers.) None                              |                           |  |  |  |
| 20. LOGISTICS IMPACTS (Include facilities, maintenance, training, and support equipment impacts.) NONE   | 21. OPERATIONAL IMPACTS (Include continuity and back up needs and plans.) None   |                           |  |  |  |
| 22. ADDITIONAL MAJOR CHANGE ACTIVITIES (Include who will accomplish each of them and staff hours required.)  None  |  |                           |  |  |  |
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| NWS CHANGE FORM PART B - PHYSICAL ITEM AND DOCUMENT IMPACT MATRIX SUPPLEMENT  This information is required prior to publication of Engineering Modification Notes and Software Release Notes. List physical items to be replaced and specify any changes in related documentation. (Submitters should complete this information, if known. WSH will assist.) |                   |                                 |                                    | ORIGINATOR TRACKING NUMBER      WSH TRACKING NUMBER  NWS 617 |               |           |               |                                    |              |
|--|-------------------|---------------------------------|------------------------------------|--|---------------|-----------|---------------|------------------------------------|--------------|
|  |                   |                                 |                                    |  |               |           |               | 3. ITEM NAME, 4. CIRCUIT TYPE, REM | 4.<br>REMOVE |
| SOFTWARE VERSION,<br>OR SITE LOCATION  | REPLACE<br>MODIFY | A. PART NUMBER OR CONFIGURATION | B. SERIAL NUMBER(S) OR<br>COMMENTS | CONFIGURATION  | A. IDENTIFIER | B.<br>REV | A. IDENTIFIER | B.<br>REV                          |              |
| TBD  |                   |                                 |                                    |  |               |           |               |                                    |              |
|  |                   |                                 |                                    |  | TBD           |           |               |                                    |              |
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|  |                   |                                 |                                    |  |               |           |               |                                    |              |
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| NWS CHANGE FORM<br>PART C   | T. ORIGINA  | TOR TRACKING NUMBER                    |   |  |  |  |
|---|---|--|---|--|--|--|
| WSH is responsible for Part C, but submitters may complete sections that would help clarequirement or the necessary implementation actions.   | arify the change  | 2. WSH TR                              | ACKING NUMBER   |  |  |  |
| 3. CCB COST EVALUATION  |   |  |   |  |  |  |
| NWS COST \$ 1,250 FAA COST \$ DOD COST \$ OTHER AGENC (SPECIFY)   |   | TOTAL COST \$ 1,25                     | 50.00   |  |  |  |
| 4. IMPLEMENTATION DOCUMENTS REQUIRED  |   |  |   |  |  |  |
| ☐ Engineering Modification Note ☐ Software Release Notes  | Engineering Modification Note Software Release Notes Other Document (Specify) |  |   |  |  |  |
| ADDITIONAL IMPLEMENTATION INSTRUCTIONS (e.g., Implementation schedule, parts documentation required, and status reporting instructions.) Include documentation, data completion of the implementation activity. |   |  |   |  |  |  |
| 5. IMPLEMENTATION ACTIVITY REQUIRED   | 6. REQUIRED<br>COMPLETION<br>DATE   | 7. RESPONSIBLE<br>PERSON AND<br>OFFICE | 8. DOCUMENT OR<br>ACTION REQUIRED TO<br>VERIFY COMPLETION |  |  |  |
|   |   |  |   |  |  |  |
| Site procure memory modules   |   |  |   |  |  |  |
| Site reports receipt of modules to NCF  |   |  |   |  |  |  |
| NCF coordinates installation of modules with HP   |   |  |   |  |  |  |
| Test and Analysis begin   |   |  |   |  |  |  |
| Test data analyzed  |   |  |   |  |  |  |
| Site restored to original configuration or RC is amended to make a permanent change   |   |  |   |  |  |  |
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